



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

CAMP TAUNTON

PARENT HANDBOOK SUMMER 2025



**OLD COLONY YMCA—TAUNTON BRANCH
71 Cohannet Street—Taunton, MA
508-823-3320
WWW.OLDCOLONYYMCA.ORG**

WELCOME TO CAMP TAUNTON

ENSURE A BRIGHTER FUTURE

It is our goal at Taunton Y Camp to provide the building blocks necessary for child development. Our dedicated staff team strives to be positive role models and provide your child with the tools necessary to develop friendships and confidence; to feel empowered; to set boundaries; and to ensure your children are in a safe community where their best interests are our #1 priority. It is our objective to provide a creative learning environment through our youth programs and activities to engage, motivate, and induce self-esteem and to light your child's individual and unique spark.

We are dedicated to producing a great camp with exceptional role models so you and your child can rest assured that you picked the right place for your summer. Although this year may look different than past summers, we hope to create a camp experience that will make for the best summer ever!

Sincerely,
Jess Towne—Summer Camp Director



CAMP CONTACT INFORMATION

Jess Towne —Camp Director
781-857-9773
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Shay Israel—Billing Coordinator
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Sean Morrissey—Executive Director
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Camp Phone—774-517-7139

HOW WE ARE LICENSED

Camp Taunton is licensed by the Massachusetts Department of Public Health and local Board of Health. Parents may request copies of our background check policies, health care policies, and discipline policies as well as procedure for filing grievances.

TUITION / REFUND POLICY

- Weekly Fee: \$265/member | \$315/non-member. AM/PM Care for additional cost.
- Payments must be paid in full no later than June 6th, or upon registration thereafter.
- Tuition refund will be awarded for medical reasons (doctors note required) or relocation of family with proper documentation. A formal request for refund must be made in writing.



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2025 CAMP CALENDAR

CAMP TAUNTON | OLD COLONY YMCA | 774-517-7139

| DATES | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|------------------------------------|---|---------------------|--|------------------------------------|-------------------------------------|
| WEEK 1 JUNE 16-20 | WEEK ONE: FIND YOUR Y | | | | |
| | School | Last Day of School! | Welcome to Camp! | Closed Happy Juneteenth! | Welcome to Camp! |
| WEEK 2 JUNE 23-27 | WEEK TWO: CAMP Y GOT PRIDE | | | | |
| | YMCA Pool <i>Tie Dye Day</i> | <i>Hat Day</i> | In-House Day <i>Wacky Wednesday</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 3 JUNE 30—JULY 4 | WEEK THREE: HOLLYWOOD | | | | |
| | YMCA Pool <i>Heroes vs Villains</i> | <i>Hat Day</i> | In-House Day <i>Disney Day</i> | <i>Crazy Socks Day</i> | Closed Happy 4th of July! |
| WEEK 4 JULY 7-11 | WEEK FOUR: WET AND WILD | | | | |
| | YMCA Pool <i>Luau Day</i> | <i>Hat Day</i> | In-House Day <i>Beach Day</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 5 JULY 14-18 | WEEK FIVE: OLYMPIC GAMES | | | | |
| | YMCA Pool <i>Heritage Day</i> | <i>Hat Day</i> | In-House Day <i>Color Wars</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 6 JULY 21-25 | WEEK SIX: TAUNTON Y GOT TALENT | | | | |
| | YMCA Pool <i>Pajama Day</i> | <i>Hat Day</i> | In-House Day <i>Talent Show</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 7 JULY 28- AUGUST 1 | WEEK SEVEN: NATURE | | | | |
| | YMCA Pool <i>Camo Day</i> | <i>Hat Day</i> | In-House Day <i>Explorers Day</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 8 AUGUST 4-8 | WEEK EIGHT: OUT OF THIS WORLD | | | | |
| | YMCA Pool <i>Alien Invasion</i> | <i>Hat Day</i> | In-House Day <i>Under the Stars</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 9 AUGUST 11-15 | WEEK NINE: MAGIC AND SCIENCE | | | | |
| | YMCA Pool <i>Witches and Wizards</i> | <i>Hat Day</i> | In-House Day <i>Experiments Day</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |
| WEEK 10 AUGUST 18-22 | WEEK TEN: CARNIVAL | | | | |
| | YMCA Pool <i>Mismatch Day</i> | <i>Hat Day</i> | In-House Day <i>End of Camp Party</i> | <i>Crazy Socks Day</i> | <i>Crocs Day</i> |

CAMP OVERVIEW

STAFF RATIOS

Staff Ratios — Campers 6 and under staff ratio is 1 staff to every 5 campers. Campers 7 and older staff ratio is 1 staff to every 10 campers. Group size may vary depending on age and enrollment, however groups will not exceed 25 campers.

BREAKFAST AND LUNCH

Breakfast and lunch are provided daily by Taunton Public Schools. Please be sure to pack water and plenty of snacks each day! **WE ARE NOT A PEANUT-FREE CAMP!** If your child has a peanut allergy, please write it on your medical forms. All counselors will be notified and will make sure your child will not be near other children consuming peanut products.

Please provide a variety of snacks for your child to refuel throughout their busy camp day.

PICK UP AND DROP OFF

Camp Drop Off begins at 8:45am: Pull up to the drop off location and a staff will greet you and check in your child. Call the Camp Phone if arriving after 9:00am. Field Trip busses depart at 9:30am

Camp Pick Up begins at 3:45pm: Pull up to the pick up location and a staff will greet you and call for your child.

CHILD SAFETY—WORKING TOGETHER

Everyone shares a responsibility to help keep children safe, ensure their rights are protected and that their needs are met. The safety and wellbeing of the children and youth in our care is our primary concern. Old Colony YMCA has zero tolerance for inappropriate behavior involving children, and we take multiple steps to prevent child sexual abuse within our organization.

STAY IN THE LOOP

- All campers are required to register for Class Dojo software. This will be the quickest way for us to communicate with our camp families. Class Dojo is an online platform where our camp counselors and admin staff will share daily updates, theme day reminders, and important emergency communication. Scan the QR Code to connect to our camp!
- Follow us on social media for camp posts.
- Welcome emails will be sent out weekly.



PREPARING FOR CAMP

CLOTHING

Plan on dressing your camper in comfortable clothes. Be sure the camper is familiar with personal items and can identify them in the event of a loss. Label everything including masks, towels, lunch boxes, etc. Campers **MUST** wear closed-toe shoes that will provide some support and tread (sneakers work best). All clothing should be appropriate for outdoor play. We recommend sending them in clothes that are **OK** to get dirty, as our fun activities sometimes end with a lot of mess! Current Camp shirts **MUST** be worn on field trip days. All campers should bring a change of clothes every day.

BACKPACKS

Backpacks are good for transporting items to and from camp. Please label the backpack with your camper's name! Campers have a designated area to leave their backpack during each activity. Backpacks with wheels are often more of a hindrance than a convenience, as they are hard to wheel over the grass, wood chips, and terrain.

LUNCH, SNACKS, & WATER

We provide breakfast and lunch daily. We cannot heat up or refrigerate food. Be sure to pack your camper your campers additional food and drinks appropriately. All campers should bring a refillable water bottle as we have water stations available to our campers at all times. Again, there is no refrigeration available but freezing a water bottle makes a great ice pack and a refreshing afternoon drink!

SUNSCREEN

We ask that you apply sunscreen to your child before you drop them off at camp each morning, and that you provide them with sunscreen to be kept in their backpacks. Sunscreen should also be labeled with your camper's name. Counselors will have campers reapply sunscreen multiple times throughout the day. Sunscreen will also be available if a child does not have their own.

BUG SPRAY

Bug spray will be needed for some field trips when we are in the woods. Please provide them with bug spray (labeled with their name) to be kept in their backpacks. Bug spray will also be available if a child does not have their own.

FIELD TRIPS

Children must be dropped off between 8:45-9:00am. If parents are running late we encourage them to notify us via phone call otherwise children will not be accepted for the day. Busses leave promptly at 9:30am and will not wait for late campers. Children cannot be dropped off or picked up from a field trip location. Camp shirts must be worn on field trip days. Additional camp shirts are available for purchase for \$5. Children must wear sneakers, however, can bring a change of flip flops for beach trips.

WHAT NOT TO BRING

Camp is a natural setting to retreat from the amenities of electronic technology and to discover self-potential, group dynamics, friendships and nature. Cell phones, iPad/tablets, kindles, Nintendo DS/DSI, MP3 players, iPod, Pokémon or other trading cards, toys, etc. do not fit into the camp setting. Please do not send any valuable or meaningful items to camp with your child, leave these items at home. Money is not permitted for use on field trips.

LOST & FOUND NOTICE

All lost & found items can be claimed at the lost and found bin located at pick up. Reminder: Campers need to leave their personal belongings and electronics at home. They are **NOT PERMITTED** at camp. **The Y and our staff will not be responsible for lost, stolen, or damaged toys or electronics.**

IMPORTANT REMINDERS

PHYSICALS AND IMMUNIZATIONS

Up to date physical and immunization reports must be on file **BEFORE** the child attends his/her first day of camp! Children will be unable to attend camp if these reports are not on file.

PHOTO NOTICE

The following photo release is contained in the camp application you have filled out for your camper(s). "It is understood and agreed that Old Colony Y reserves the right to take and utilize pictures, likenesses, videos, and testimonials of participants for promotional purposes including, but not limited to, reports, publications, brochures, emails, our website and other instances of online presence in perpetuity." If for any reason you do not want your child photographed, please be sure that you have written **"DO NOT PHOTO"** on the application.

MEDICAL CONCERNS

Care plan for Mildly Ill Campers

When a camper feels ill, the responsible counselor will remove the child from activities to determine whether the child is over-heated or over-tired. If after a period of time, the child still feels ill, the responsible counselor will take him/her to the nurse's station. After discussion and examination the camp nurse will determine if the child should be separated and lie down for a while, or if the parent should be called to pick up the child. The child who is not sent home will remain in the nurse's station until recovered to a point where he/she can rejoin regular camp activities.

Plan For Administering Medication

1. When a camper needs either prescription or non-prescription medication administered during camp time, the parent will fill out and sign the authorization to administered medication to a camper form. This form will be given to Camp Director or responsible counselor, along with the medication in its original container bearing the pharmacy label (showing prescription number, date filled and prescriber's name, name of medication, directions for use and patient's name). In the case of non-prescribed medication, the parent will write out and sign detailed instructions for dosages.
2. The camper's counselor will take the instructions and medications to the camp nurse, who will lock the medication in the storage cabinet (or put in refrigerator, as is appropriate) and log in the information on the child's daily log for medication administration.
3. The camp nurse will review all requests for administration of medications, compare them with the health record, and using the Health Care Consultant Acknowledgement of On-Site Medications Form, given signed written orders for the health supervisor.
4. When it is time for administration of the medication, the child's counselor will take him/her to the nurse's station to receive the medication from the camp nurse, who will log in each day's administration on an individual Daily Log of Medication Administration Form.
5. When no longer needed or at the end of camp, medications will be returned to the parents via the counselor or will be destroyed (parents will indicate in their written instructions which they prefer).

We do recognize that inhalers and epi-pens may need to travel around camp with the camper. If this is the case, our nurse will work with parents on determining the best plan for storage/travel of the medication. Please feel free to contact our nurse with your concerns at extension 331. |

Plan of Emergency Care

In the event that a camper requires immediate emergency care a camp counselor, camp nurse, or camp director will begin EAP by dialing 911.

- For emergencies: Dial 911
- Campers will be brought to the nearest available hospital. Most emergency will be transported to: Morton Hospital

RAINY DAYS AND EXTREME HEAT

In the case of thunder, lightning and torrential downpours, all campers are brought inside. In the case of light rain we try to continue all activities outdoors, however activities may be closed and campers moved to alternate activities/locations. In the case of extreme heat, we utilize all shaded areas, implement extra water activities and we utilize rooms indoors to move some activities inside. We do request that you prepare your camper with clothes/gear for all weather. Camp leadership staff will make decisions during inclement weather to ensure safety for all campers.

OFF HOURS CONTACT BETWEEN STAFF AND CAMPERS

The YMCA **PROHIBITS** staff members from babysitting for, caring for, providing instruction to, or engaging in a social relationship outside of approved YMCA activities with children (other than family) who participate in YMCA programs or class activities. This policy is designed for the protection of all involved - children, staff members, parents and YMCA. If you have further questions, please do not hesitate to talk to the camp director.

ATTENDANCE POLICIES

Attendance is taken at the beginning of every day. If a child shows up late, we will add them to the attendance to make sure they are accounted for. If your child will be missing a day, please call the camp phone.

ATTENTION PARENTS/GUARDIANS

ALL persons **INCLUDING PARENTS** picking up campers must be listed as an **AUTHORIZED RELEASE** and have a **PICTURE ID**. We will check both forms of identification to ensure that they match. This is necessary to maintain the highest of standards. Please inform camp staff if you need to add an adult to your pick-up list.

CAMP ARRIVAL INFO

Extended Morning Care (8:00am–9:00am) AND Parent Drop Off 8:45 - 9:00am

Please review and follow pick up and drop off procedures. If your child is arriving after 9:00am please contact a camp staff ahead of time.

Late Drop Offs

All late drop offs should report to the camp staff to be checked in.

EARLY DISMISSAL

- No child may leave the camp grounds for early dismissal without his/her parent or guardian signing him/her out in front of the camp with a leadership staff present.
- All early dismissals **MUST CALL** the camp office to be checking in and a staff member will meet you at a designated area with the camper(s)
- If a child is to be released early, we must be informed in writing or by phone call.
- **DUE TO DISMISSAL PROCEDURES: NO CAMPER WILL BE DISMISSED BETWEEN 3:15-3:45PM**

CAMP DEPARTURE INFO

Camp Pick Up begins at 3:45pm.

Please follow pick up procedures. If you are picking up your child early, you may be asked to wait as we close the camp day.

Late Pick Up

Parents picking up after 4:05pm (5:05pm for extended care) are subject to late fees. Inability to consistently pick up camper on time will result in termination of care.

ASSET DEVELOPMENT AT SUMMER CAMP

Camping experiences hold tremendous opportunities to build Developmental Assets. They take young people away from their everyday environment and, at their best, create an asset-rich experience for the campers, linking them with caring adults and older youth, engaging them in stimulating, challenging activities, developing leadership skills, and cultivating positive peer relationships. Though individual camper experiences varied, a major study of camps by the **American Camping Association** found that, overall, children, parents, and camp staff all reported improvements in positive identity, social skills, physical and thinking skills, and positive values and spirituality.

TAUNTON Y CAMP IS DEDICATED TO INTEGRATE ASSET DEVELOPMENT THIS SUMMER BY

- Creating ways for young people to get to know each other. Including **getting-to-know-you activities** and community-building activities.
- Being clear about **boundaries and expectations**. At camp, we create a list of rules and expectations and enable the campers to offer their ideas.
- Recognizing that some young people may not have much **experience with camping**. They may resist trying certain camping activities because of their inexperience—or their fear of failure.
- Integrating a service project into your camp activities. We ask that the children pick up after themselves, especially after lunch time.
- Expecting camp counselors to be **role models**. Train them about this critical aspect of their role and how important it is for them to exhibit positive behaviors to campers.
- Engaging young people in leadership roles in our camp. Veteran campers can be mentors for first-time campers.
- **Emphasizing an experiential educational aspect** to our program. This summer we will feature summer learning, STEAM activities and team building activities.
- Our goal is to inspire teachable moments throughout a camper's day that will keep their minds engaged while having fun. Sending your child to camp will enable them to stay on track through creative positive learning experiences. The Y recognizes that all children experience learning losses when they do not engage in educational activities during the summer. We provide building blocks necessary for a child's development.
- **Empowering young people by giving them choices** during activities. For example, if you have a craft activity, consider having two or three possible outcomes that use the same materials.

YMCA MEMBERSHIPS

We hope that you will consider joining us as a member of the YMCA. If you are interested in becoming a member and benefiting from our savings on program rates, please contact our Membership Experience team for more information.

MANAGING CHALLENGING BEHAVIORS

Part of healthy youth development includes learning how to get along with others, managing conflicts, and working together as a team. Camp provides the ideal setting for these skills to develop. All types of youth come to Y camp. Some are excited to be there and adapt readily to the activities and excitement of the day. But other youth may be nervous or even anxious about the camp experience. When youth are struggling in the camp setting we want to do all that we can to help the youth have a positive experience.

Our philosophy of behavior management is that children do not want to act out or lose control. In fact, challenging behaviors sometimes occur when a youth needs extra attention, or does not feel safe, or needs help managing overwhelming feelings of anger. Our goal is to work with your child to provide them with the support that is needed to help the child make a more positive adjustment to camp.

For this reason we have implemented the “Camper Support Protocol.” The advantage to the Camp Support Protocol is that it provides a process to proactively identify campers who need extra support. By immediately responding to youth who need extra support the behaviors can be more rapidly addressed and it is less likely that the behaviors will escalate.

CAMPER SUPPORT PROTOCOL

Purpose | To proactively provide support to campers who have behavioral or emotional challenges in the camp setting.

Goal | To provide the youth with supports needed to participate in healthy engaging activities at camp.

NOTE: Emergency and safety concerns are handled immediately. This includes: runaways, fights, assaults, fire setting, serious threat of violence or suicide.

- 1. Identifying Behaviors of Concern** | On Monday of each camp week counselors observe camper behaviors throughout the day to identify “**behaviors of concern**”. These behaviors will be identified as “Yellow Flag” behaviors that indicate the need for the camp staff to slow down, look at the situation, and figure out a better way; or “Red Flag” behaviors that indicate a more serious situation to be addressed.
- 2. Documenting and Notification of Concerns** | At end of day (especially Mondays) counselors will fill out the camper concern form and deliver to director at camp office before leaving for the day.
- 3. Administrative Review** | Camp Administrator reviews all forms before leaving camp to ensure there is no need for immediate follow-up.
- 4. Camp Support Planning and Coordination Meeting** | Camp Support teams will meet weekly. Camper Support Plans are completed. Following meeting the Clinician assists with any “Red Flag” situations; Camper Support Worker begins implementation of plans.
- 5. Camper Supports** | Camper Supports may include providing more attention, adding additional staffing added to the camp group, or a morning or afternoon (or both) check- in by our Camp Support Specialist. We may also have a clinical social worker or administrative staff observe the camper’s behavior to help us determine how we might help the camper and counselors to better manage the behavior or to talk with the camper about the behavioral challenges. Another part of the plan may be to contact you. As the parent you have the most experience in dealing with your child’s feelings and behaviors and you may have ideas for us to use in the camp setting.
- 6. Daily Support Meetings and Follow Up** | Each day the Director or designee and Camper Support Worker will sit down in the morning to review all Red Flag Support Plans and progress, and any Yellow Flag Plans where the behavior is escalating. These meetings direct the course of the Camper Support Worker’s Day in terms of the situations that need follow-up or a different strategy.

ROLE OF PARENTS/GUARDIANS

We hope to work in partnership with you to help ensure that your child has a positive camp experience. There are several things you can do to help in this process:

Talk to your child about the camp experience. Ask them to describe the activities. Ask who their friends are and what their counselor is like. While children often respond to the question “What did you do at camp today?” with “Nothing”, we assure you that a lot of things happen at camp. Sometimes campers are too tired after the camp day, but they may be talkative on the morning ride or waiting for the bus. If your child is not having fun at camp it may be difficult for the child to tell you or to give you reasons why. Specific questions may be helpful. Some things you might wish to ask include: “Are you worried that something bad will happen at camp? What comes to mind when you say you don’t like camp? Is there anyone at camp you can talk to?”

Reassure your child. Children get anxious just like adults. They may worry about disappointing you. They may wish they could stay at home during the summer. They may have fears about swimming or bugs or not living up to your expectations.

Being a parent is hard. There are many difficult decisions to make. You don’t want to overreact to situations because you know that many concerning behaviors are normal—but you don’t want to fail to get your child help if it is needed. If your child indicates they are having a bad experience or they refuse to talk about camp and you have concerns—please contact us. **Do not diminish your child’s concerns.** Your child may be exposed to behaviors that the child has not seen or experienced before. Our camps are very diverse. We have children with developmental disabilities and from all walks of life. We have children attend camp who may have serious behavioral problems or who have experienced traumatic life events. For the most part this exposure is part of growing up and can be a positive experience as children learn how to deal with all types of people. But it is not good if your child is scared or doesn’t feel safe. Again, we encourage you to contact us and come in to speak with us about the situation that may be troubling your child.

YOUTH VALUES PLEDGE & ANTI– BULLYING PELDGE

Please review with your child the following values pledge and anti-bullying pledge.

VALUES PLEDGE

I promise to be respectful of other people’s feelings, property and body.

I promise to be responsible for my everyday duties, the things I use and the areas I use.

I promise to be honest when I make mistakes and honest when I have not done what I was responsible for.

I promise to be respectful of the YMCA and the Afterschool program rules.

I promise to be an all around caring person to those who participate in the YMCA Program and the people in the YMCA building.

ANTI– BULLYING PLEDGE

We are all friends at the Y

We will not bully others

We will help others who are being bullied by speaking out and by getting adult help

We will use extra effort to include all others in activities

We will display the core values of Caring, Honesty, Respect and Responsibility

CAMP’S RESPONSE TO BEHAVIOR ISSUES

Our goal is to work together with our staff and with parents to do all we can to help your child and all children have a positive camp experience. That said there are some behaviors that are very serious. Hitting, bullying, cursing, and running away are all behaviors we will want to address with parents. In general we do all that we can to avoid dismissing a child from camp. However, when we do have serious issues it is critical that parents work with us to address the behavior.

Meningococcal Disease and Camp Attendees: Commonly Asked Questions

What is meningococcal disease?

Meningococcal disease is caused by infection with bacteria called *Neisseria meningitidis*. These bacteria can infect the tissue (the “meninges”) surrounding the brain and spinal cord and cause meningitis, or they may infect the blood or other organs of the body. Symptoms of meningococcal disease may appear suddenly. Fever, severe and constant headaches, stiff neck or neck pain, nausea and vomiting, and rash can all be signs of meningococcal disease. Changes in behavior, such as confusion, sleepiness, and trouble waking up, can also be important symptoms. In the US, about 350-550 people get meningococcal disease yearly, and 10-15% die despite receiving antibiotic treatment. Of those who survive, about 10-20% may lose limbs, become hard of hearing or deaf, have problems with their nervous system, including long-term neurologic problems, or have seizures or strokes. Less common presentations include pneumonia and arthritis.

How common is meningococcal disease?

Meningococcal disease is becoming much less common. Over the past 20 years, the overall incidence of meningococcal disease in the US has declined ten-fold. Twenty years ago in Massachusetts, there were 80-100 cases of meningococcal disease per year. In contrast, for the past decade, the average is approximately 12 cases per year. Declining rates of meningococcal disease may be due in part to the introduction of meningococcal vaccines (initially recommended routinely in 2005 for adolescents aged 11-12 years, unvaccinated college freshmen living in residence halls) as well as other factors such as the decline in cigarette smoking, which may impact susceptibility to this disease.

How is meningococcal disease spread?

These bacteria are passed from person to person through saliva (spit). You must be in close contact with an infected person’s saliva for the bacteria to spread. Close contact includes activities such as kissing, sharing water bottles, sharing eating/drinking utensils, sharing cigarettes, or being within 3-6 feet of someone who is infected and coughing and sneezing.

Who is most at risk for getting meningococcal disease?

People who travel to certain parts of the world where the disease is very common, microbiologists, people with HIV infection, and those exposed to meningococcal disease during an outbreak are at risk for meningococcal disease. Children and adults with damaged or removed spleens or persistent complement component deficiency (an inherited immune disorder) are at risk. Adolescents and people who live in specific settings, such as college freshmen living in dormitories and military recruits, are at greater risk of disease from some of the serotypes.

Are camp attendees at increased risk for meningococcal disease?

Children attending day or residential camps are not considered to be at an increased risk for meningococcal disease because of their participation.

Is there a vaccine against meningococcal disease?

Yes, there are multiple meningococcal vaccines. Quadrivalent meningococcal conjugate vaccine ([Menveo](#) and [MenQuadfi](#)) protects against 4 serotypes (A, C, W, and Y) of meningococcal disease. The meningococcal serogroup B vaccine ([Bexsero](#) and [Trumenba](#)) protects against serogroup B meningococcal disease for people aged 10 and older. Pentavalent meningococcal vaccine protects against serogroups A, B, C, W, and Y. It may be administered to persons aged ≥10 years when both a quadrivalent meningococcal conjugate vaccine and meningococcal B vaccine are indicated at the same visit.

Should my child or adolescent receive the meningococcal vaccine?

Different meningococcal vaccines are recommended for a range of age and risk groups. Meningococcal conjugate vaccine (MenACWY) is routinely recommended at age 11-12 years with a booster at age 16 and is required for school entry for grades 7 and 11. In addition, these vaccines may be recommended for additional children with certain high-risk health conditions, such as those described above.

Meningococcal serogroup B vaccine ([Bexsero](#) and [Trumenba](#)) is recommended for people with certain relatively rare high-risk health conditions (examples: persons with a damaged spleen or whose spleen has been removed, those with persistent complement component deficiency (an inherited disorder), and people who may have been exposed during an outbreak). Adolescents and young adults (16 through 23 years of age) who do not have high-risk conditions may be vaccinated with a serogroup B meningococcal vaccine, preferably at 16 through 18 years of age, to provide short-term protection for most strains of serogroup B meningococcal disease. Parents of adolescents and children at higher risk of infection because of certain medical conditions or other circumstances should discuss vaccination with their child’s healthcare provider.

How can I protect my child or adolescent from getting meningococcal disease?

The best protection against meningococcal disease and many other infectious diseases is thorough and frequent handwashing, respiratory hygiene, and cough etiquette. Individuals should:

- 1) wash their hands often, especially after using the toilet and before eating or preparing food (hands should be washed with soap and water, or an alcohol-based hand gel or rub may be used if hands are not visibly dirty).
- 2) cover their nose and mouth with a tissue when coughing or sneezing and discard the tissue in a trash can; or if they don’t have a tissue, cough or sneeze into their upper sleeve.
- 3) not share food, drinks, or eating utensils with other people, especially if they are ill.
- 4) contact their healthcare provider immediately if they have symptoms of meningococcal disease.

If your child is exposed to someone with meningococcal disease, antibiotics may be recommended to keep your child from getting sick.

You can obtain more information about meningococcal disease or vaccination from your healthcare provider, your local Board of Health (listed in the phone book under government), or the Massachusetts Department of Public Health Divisions of Epidemiology and Immunization at (617) 983-6800 or on the MDPH website at <https://www.mass.gov/info-details/school-immunizations>.

For additional information on *Invasive Meningococcal Disease (IMD)*, please visit the CDC’s website: [Meningococcal Disease Surveillance and Trends | Meningococcal | CDC](#).

Provided by the Massachusetts Department of Public Health in accordance with M.G.L. c.111, s.219 and 105 CMR 430.157(C). Reviewed September 2024

Massachusetts Department of Public Health, Divisions of Epidemiology, and Immunization